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## BIB DATA SHEET

CONFIRMATION NO. 9990

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/821,333	04/09/2004	424	1647	PP17201.018 (035784/27729)		
<b>APPLICANTS</b> Bret A. Shirley, Waltham, MA; Susan Babuka, Oakland, CA; Bao-Lu Chen, San Ramon, CA; Maninder Hora, Danville, CA; Minna Choe, Danville, CA; Melanie Tellers, Cranford, NJ;						
<b>** CONTINUING DATA *****</b> This application is a CON of 10/035,397 10/25/2001 PAT 6,887,462 which claims benefit of 60/330,404 10/18/2001 and claims benefit of 60/282,614 04/09/2001						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/24/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /JEGATHEESAN SEHARASEYON/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWINGS</b> 23	<b>TOTAL CLAIMS</b> 24	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> NOVARTIS VACCINES AND DIAGNOSTICS INC INTELLECTUAL PROPERTY - R338 PO BOX 8097 EMERYVILLE, CA 94662-8097 UNITED STATES						
<b>TITLE</b> HSA-free formulations of interferon-beta						
<b>FILING FEE RECEIVED</b> 1028	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		